



## VLER Scenario - Hand Surgery



The story of fictional Veteran Army Colonel Ben Wright is based on one Veteran's actual experiences, and describes how sharing medical information electronically could have provided a better healthcare experience.

### 55-year old retired Army COL Ben Wright was working at a U.S. Army installation after having served over 30 years in the Army.

During a periodic exam at an Army hospital, he spoke with his personal physician about the increasingly intense pain in his right hand that was no longer responding to pain medication. A hand surgeon met with COL Wright the following week and x-rays showed advanced arthritis in his thumb joint. The surgeon recommended surgery to repair the joint within the next month.

On the day prior to surgery, COL Wright underwent routine pre-operative procedures during which the radiologist noticed an abnormality in the electrocardiogram and immediately postponed the surgery. COL Wright was told to go to a regional private hospital to meet with a cardiologist and undergo a complete screening before being cleared for surgery. Over the next month, COL Wright went back and forth from the Army

hospital to the private hospital for x-rays, CT scans, and stress tests, until he was finally cleared for surgery. While the doctors were able to communicate with each other behind the scenes, COL Wright knew there was no electronic records sharing between the two hospitals, so he hand-carried his records and test results between the Army hospital and the private hospital to be sure his most current medical information was available for his different doctors.

Two years after his surgery, COL Wright left his position at the Army installation and was provided a hard copy of his medical record from the Army hospital. He noticed there was a two-month gap in his record; it was missing information on all the tests he took with the private cardiologist two years before. The missing information could only be obtained by requesting a hard copy of the records from the private hospital, which was a time-consuming and laborious burden for COL Wright.

### How would VLER have helped COL Wright?

VLER could have improved the delivery of COL Wright's care by making his medical information available to all participating organizations electronically. When VLER is implemented, it will enable timely sharing of electronic medical information between DoD, VA, and federal and private health care partners who participate. This timely access to information is needed to deliver better continuity of care and reduce medical and administrative errors.

Once fully implemented, VLER will eliminate the need for Service Members and Veterans to hand-carry paper copies of their electronic medical records from one facility to the next and it will minimize missing information within a Service Member's or Veteran's medical record.





# Virtual Lifetime Electronic Record (VLER)



## What is VLER?

On April 9, 2009, President Barack Obama announced that the Department of Defense (DoD) and the Department of Veterans Affairs (VA) were working toward the creation of a Virtual Lifetime Electronic Record (VLER), intended to provide seamless access to electronic health records for Service Members and Veterans. This effort is a joint DoD and VA initiative that will ultimately enable comprehensive administrative (i.e., personnel and benefits) and medical information for a Service Member or Veteran to be electronically shared with authorized personnel.



## When achieved, VLER will result in:

- Better informed clinicians, service providers, and consumers of benefits and care
- Improved continuity and timeliness of service delivery for Service Members, Veterans, and their designees
- Seamless access to personnel, benefits, and medical information from day one of a Service Member's military career through transition to Veteran status and beyond

VLER is being coordinated by the DoD/VA Interagency Program Office (IPO), an organization responsible for oversight and coordination of DoD/VA information-sharing initiatives. VLER builds on previous DoD and VA data sharing initiatives but goes a step further by including private sector organizations (e.g., Kaiser Permanente, Med Virginia) and other federal organizations (e.g., Social Security Administration).

## How does VLER work?

VLER will develop a new means to safely exchange data between existing sources of health information, including DoD, VA, other federal agencies, and private sector organizations. VLER is not an acquisition program nor will it result in one single DoD/VA records management system.

VLER will leverage the Nationwide Health Information Network to enable information sharing among DoD, VA, and the private sector health care organizations. VLER will share health information with the strictest and most rigorous standards of privacy and security, so that our Service Members and Veterans can have confidence that their health information will be fully protected under the Health Insurance Portability and Accountability Act (HIPAA) and Privacy Act.

## How is VLER being implemented?

VLER is being implemented iteratively through operational pilots, learning from each pilot to improve the next iteration. To conduct the initial pilot of VLER, DoD joined an existing partnership between VA and private health care provider Kaiser Permanente in San Diego, California. This first pilot phase was conducted in January 2010. The next VLER pilot is in Tidewater, Virginia and expands upon the technology and data used in the first phase. Future pilot sites for VLER are being explored and finalized.

**VLER will allow secure and timely access to Service Members' and Veterans' medical records, providing info needed to deliver better continuity of care and reduce medical and administrative errors**